

IDAHO HUNTER/BOWHUNTER EDUCATION COURSE

PARENTAL ACKNOWLEDGEMENT AND AUTHORIZATION TO HUNTER/BOWHUNTER EDUCATION INSTRUCTOR

I / We, hereby give permission for

NAME OF STUDENT

to attend the Idaho Hunter/Bowhunter Education Course. In consideration of the above-named student being permitted to attend this course and in consideration of the instruction and use of facilities provided by the instructors and

(OTHER SPONSORING ORGANIZATIONS, IF ANY)

we hereby acknowledge that any claim of bodily injury or for damages arising as a result of, or in connection with the instruction or the use of these facilities by the above-named student or arising from the student's presence on or about the property or facilities of the Idaho Department of Fish and Game, said organization, their representatives or instructors shall be governed by the Idaho Tort Claims Act (Idaho Code Sec. 6-901, et. seq.). I / We also authorize certification of the student if all qualifications are met.

Dated this _____ day of _____, 20_____.

Parent or Guardian _____ .

Individuals with disabilities may request reasonable accommodations by informing the class instructor or by contacting the Idaho Department of Fish and Game State [Hunter Education Coordinator's office](#) at 208-334-3746 or through the Idaho Relay Service at 1-800-377-2529 (TDD).